## BEST AVAILABLE COPY

|   |  | Application or Docket Number    |  |                                  |                  |        |                        |     |                     |                        |  |  |  |
|---|--|---------------------------------|--|----------------------------------|------------------|--------|------------------------|-----|---------------------|------------------------|--|--|--|
| PATENT APPLICATION FEE DETERMINATION RECORD   |  |                                 |  |                                  |                  |        |                        |     |                     | , .                    |  |  |  |
| Effective November 10, 1998   |  |                                 |  |                                  |                  |        |                        |     |                     |                        |  |  |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |                                 |  |                                  |                  | SMA    | LL ENTITY              | OR  | OTHER               |                        |  |  |  |
| FC  | PR   | NUMBE                           | R FILED  | NUMBE                            | NUMBER EXTRA     |        | E FEE                  | 7   | RATE                | FEE                    |  |  |  |
| ВА  | SIC FEE  |                                 |  |                                  |                  |        | ) <del>380.00</del>    | OR  | ·                   | HADD.                  |  |  |  |
| то  | TAL CLAIMS                                     |                                 | minus  | 20= •                            | •                |        | )=                     | OR  | X\$18=              |                        |  |  |  |
| סאו   | EPENDENT CL                                    | aims J                          | minus  | 3 = *                            |                  |        | =                      | OR  | X78=                |                        |  |  |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |                                 |  |                                  |                  |        | )=                     | OR  | +260=               |                        |  |  |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |                                 |  |                                  |                  | TOTA   |                        | OR  | L                   |                        |  |  |  |
|   |  |                                 |  |                                  |                  |        | T MON                  | JOH |                     |                        |  |  |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |  |                                 |  |                                  |                  | SMA    | LL ENTITY              | OR  | SMALL               |                        |  |  |  |
| ۲   |  | CLAIMS<br>REMAINING             |  | HIGHEST<br>NUMBER<br>PREVIOUSLY  | PRESENT          | RAT    | ADDI-<br>E TIONAL      |     | RATE                | ADDI-<br>TIONAL        |  |  |  |
| EN  |  | AFTER<br>AMENDMENT              |  | PAID FOR                         | EXTRA            |        | FEE                    |     |                     | FEE                    |  |  |  |
| AMENDMENT   | Total  | •                               | Minus  | **                               | <b>a</b>         | X\$ 9  | z                      | OR  | X\$18=              |                        |  |  |  |
| ME  | independent                                    | *                               | Minus  | ***                              |                  | X39    | =                      | OR  | X78≖                |                        |  |  |  |
|   | FIRST PRESE                                    | NTATION OF M                    | ULTIPLE DE   | PENDENT CLA                      | M ·              | +130   | _                      | 1   | +260=               |                        |  |  |  |
|   |  |                                 |  |                                  |                  | 100    |                        | OR  | TOTAL               |                        |  |  |  |
|   | ·<br>  |                                 |  |                                  |                  |        | EE                     | JOR | ADDIT. FEE          | L                      |  |  |  |
| (Column 1) (Column 2) (Column 3)  |  |                                 |  |                                  |                  |        |                        |     |                     |                        |  |  |  |
| MENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT |  | NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATI   | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |  |  |  |
| NOM   | Total  | •                               | Minus  | .00                              | = ·              | X\$ 9  | <b>=  </b> .           | OR  | X\$18=              |                        |  |  |  |
| AME   | Independent                                    | •                               | Minus  | ***                              | =                | X39=   | =                      | OR  | . X78=              |                        |  |  |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                 |  |                                  |                  | +130   | _                      | OR  | +260=               |                        |  |  |  |
|   |  |                                 |  |                                  |                  | 101    |                        | OR  | TOTAL               |                        |  |  |  |
|   |  |                                 |  |                                  |                  |        | EE                     | jon | ADOIT, FEE          | !                      |  |  |  |
| (Column 1) (Column 2) (Column 3)  |  |                                 |  |                                  |                  |        |                        |     |                     |                        |  |  |  |
| AMENDMENT C   |  | REMAINING<br>AFTER<br>AMENDMENT |  | NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE   | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |  |  |  |
| MON   | Total  | •                               | Minus .  | ••                               | Ε                | X\$ 9: |                        | OR  | X\$18=              |                        |  |  |  |
| ME  | Independent                                    | •                               | Minus  | ées                              | Ε                | X39=   | 1                      | OR  | X78=                |                        |  |  |  |
| ٧   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                 |  |                                  |                  |        |                        | JUH |                     |                        |  |  |  |
| A Million control to control to the control to control to control to control to control to control to   |  |                                 |  |                                  |                  |        | •                      | OR  | +260=               |                        |  |  |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADOIT, FEE |  |                                 |  |                                  |                  |        |                        | OR  | TOTAL<br>ADDIT: FEE |                        |  |  |  |
| ***   | ‼ the T-lighest Nu<br>The T-lighest 14         | mber Previously P               | The Tighest Number Previously Paki For' IN THIS SPACE is less than 3, enter 3. |                                  |                  |        |                        |     |                     |                        |  |  |  |